ALTERNATE ONE SAMPLING WORKSHEET

For procedures on conducting Verification, refer to Part 8 in the *Eligibility Manual for School Meals* which may be downloaded by going to: http://www.sde.ct.gov/sde/lib/sde/PDF/DEPS/Nutrition/EligibilityManual.pdf.

This worksheet (or an equivalent form) **must** be completed and kept on file for audit purposes.

REQUIRED SAMPLE SIZE

Number of newly approved applications on file on October 1 : (Excluding direct certification letters, homeless/runaway determinations.)	
X	.03
=	or 3,000 applications, whichever is less.
Dound al	I Desimals UDWADD (For example, if you had 240 applications on file on October

Round all Decimals UPWARD. (For example, if you had 340 applications on file on October 1, and you chose to verify 3%, this would equal 10.2 applications, which you would round up to 11 applications.) [$340 \times .03 = 10.2 = 11$]

Randomly select the required number of applications.